

CCOP RFA Minority Based CCOP RFA

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CCOP Network:

Goal is to access to state of the art cancer care by linking community hospitals & physicians to NCI designated Cooperative Groups & Centers.

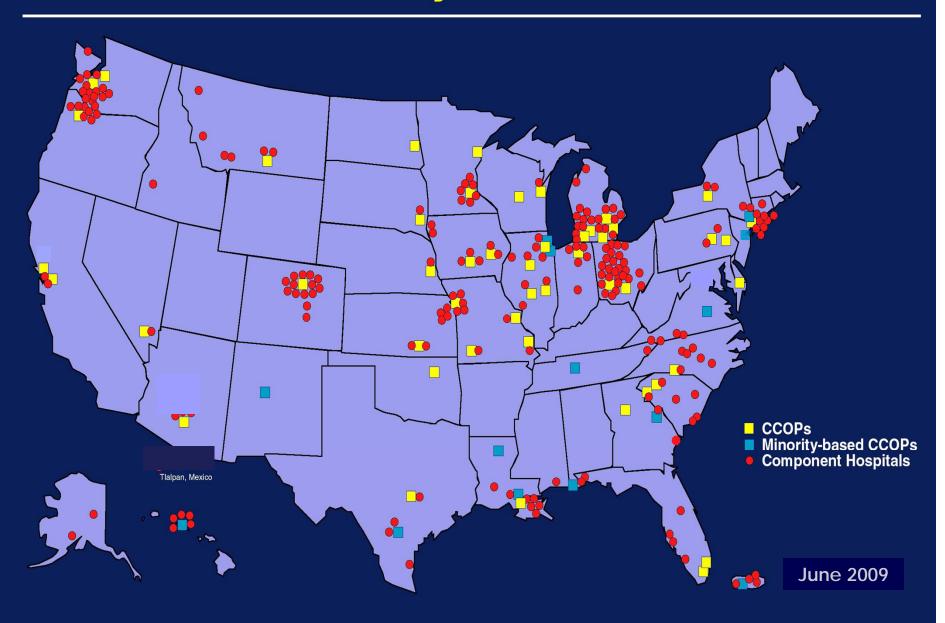
Purpose is to accrue patients and at risk people to NCI approved treatment and cancer control clinical trials (prevention, symptom management, etc)



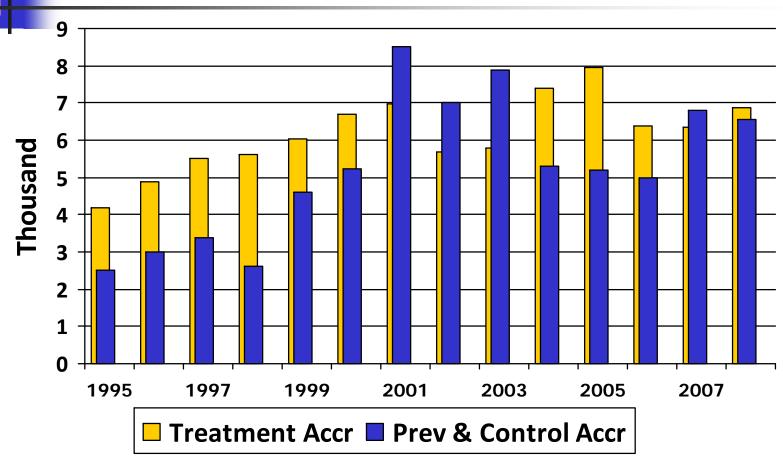
FY 2009 Funded CCOP Grants

- 47 CCOPS (28 States)
- 14 MB-CCOPS (11 States & Puerto Rico)
- 12 Research Bases
- 3,405 Participating Physicians
 - 2,190 Physicians Accrue Trial Participants
 - 1,215 Physicians Refer Trial Participants
- 395 Participating Hospitals

CCOPs and Minority CCOPs









Impact on Cancer Research Since 1983

235,528 Patients on NCI Clinical Trials

139,275 Patients on Treatment Trials

 96,253 Patients/Those at Risk for Cancer on Prevention and Control Trials



Evaluation History

Previous Evaluations:

- 1984 Initial Evaluation: Could they accrue? Quality of Care
- 1988 Follow Up: Quality of Data, Cancer Control
- 1991 MB-CCOP: Increase Minority Accrual
- 2003 CCOP Follow Up
- 2005 MB-CCOP Follow Up
- 2007 R01 Diffusion/Dissemination
- 2009 R01 Supplement for Business Case

Successful Infrastructure to Bring the Science to the Community



External Review Panel Evaluation

- CCOP & MB-CCOP Programs Successfully Met and Exceeded Their Major Goals
- Knowledge Gained from CCOP & MB-CCOP Investigators is Disseminated Throughout the Medical Community & Integrated into Practice
- Demonstrated Capacity to Engage CCOP & MB-CCOP in Cancer Prevention & Control Research and Enhancing the Clinical Trial Infrastructure
- Uniquely Positive Impact on NCI Mission of Training,
 Collaboration, Community Involvement, & Translating
 Research Results



Strategic Planning Process

- Align the Infrastructure & Incentives with Changing Nature of Clinical Trials
- Include Physicians, Administrators from CCOPs, MB-CCOPs and Research Base Investigators & External Experts

Develop Short & Long-term Goals



Strategic Planning Process

- Relationship with Other Programs:
 - Efforts to Engage Other PBRNs
 - HMO Network
 - Dental PBRNs & ONJ Study
- Minority Populations:
 - Eligibility Criteria for MB-CCOPs



- Expand Program Goals to Improve Efficiency, Productivity,
 & Collaboration in Design & Conduct of Clinical Trials
 - Community Physicians Sit on All Disease Steering
 Committees & Operational Efficiency Working Group
 - Symptom Management QOL Steering Committee
 - Recognize Unique Needs to Expand Program Goals



- Metrics Beyond Accrual
 - Accrual AND Data Quality Primary Metric of Performance
 - Consider Other Metrics to Include
 - Patients Screened for Complex Studies
 - Collection of Biospecimens in Conjunction with Studies
 - Operational Efficiency Metrics